## Case 22-10793-JNP Doc 9 Filed 02/22/22 Entered 02/22/22 08:46:08 Desc Main Document Page 1 of 11

Fill in this info	rmation to identify your	case:		
Debtor 1	Michael J. DiNapo	oli, III		
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States E	Sankruptcy Court for the:	DISTRICT OF NEW JERSEY		
Case number	22-10793			
(if known)				☐ Check if this amended fil

## Official Form 106Sum

## Summary of Your Assets and Liabilities and Certain Statistical Information

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new Summary and check the box at the top of this page.

Par	t 1: Summarize Your Assets		
		Your a	ssets of what you own
1.	Schedule A/B: Property (Official Form 106A/B)  1a. Copy line 55, Total real estate, from Schedule A/B	\$	168,000.00
	1b. Copy line 62, Total personal property, from Schedule A/B	\$	10,952.00
	1c. Copy line 63, Total of all property on Schedule A/B	\$	178,952.00
Par	t 2: Summarize Your Liabilities		
			abilities It you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D)  2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$	322,988.00
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F)  3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$	0.00
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$	14,673.00
	Your total liabilities	\$	337,661.00
Par	t 3: Summarize Your Income and Expenses		
4.	Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$	4,336.18
5.	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$	3,904.90
<sup>2</sup> ar	t 4: Answer These Questions for Administrative and Statistical Records		
6.	Are you filing for bankruptcy under Chapters 7, 11, or 13?  No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you	r other sc	hedules.
7.	■ Yes What kind of debt do you have?		
	Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.	a personal	, family, or
	Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this	box and s	ubmit this form to

the court with your other schedules.

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Debtor 1 Michael J. DiNapoli, III Case number (if known) 22-10793

8. **From the** *Statement of Your Current Monthly Income*: Copy your total current monthly income from Official Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14.

\$\_\_\_\_\_5,189.59

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Total claim	
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	0.00
<ol> <li>Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)</li> </ol>	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. <b>Total.</b> Add lines 9a through 9f.	\$	0.00

Fill in this inform	ation to identify your case:	
Debtor 1	Michael J. DiNapoli, III	
Debtor 2 (Spouse, if filing)		
United States Ba	ankruptcy Court for the: DISTRICT OF NEW JERSEY	
Case number (If known)	22-10793	Check if this is:  ☐ An amended filing ☐ A supplement showing postpetition chapter
Official Fo	orm 106l	13 income as of the following date:  MM / DD/ YYYY

### Schedule I: Your Income

12/15

0.00

0.00

0.00

Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Fill in your employment information.		Debtor 1	Debtor 2 or non-filing spouse
If you have more than one job,	Fundament status	■ Employed	☐ Employed
attach a separate page with information about additional	Employment status	☐ Not employed	■ Not employed
employers.	Occupation	HVAC	
Include part-time, seasonal, or self-employed work.	Employer's name	Air Care Of New Jersey	
Occupation may include student or homemaker, if it applies.	Employer's address	1427 Cornell Avenue Trenton, NJ 08619	
	How long employed ti	nere? 10 years	

Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated.

If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form.

For Debtor 1 For Debtor 2 or non-filing spouse List monthly gross wages, salary, and commissions (before all payroll 5,980.00 deductions). If not paid monthly, calculate what the monthly wage would be. Estimate and list monthly overtime pay. 3. +\$ 0.00 Calculate gross Income. Add line 2 + line 3. 5,980.00

Official Form 106I Schedule I: Your Income page 1

Debt	or 1	Michael J. DiNapoli, III	_	(	Case	number ( <i>if kn</i>	own)	22-10	793		
					For	r Debtor 1			Debtor filing s	2 or spouse	
	Cop	py line 4 here	4.		\$_	5,980	.00	\$		0.00	_
5.	List	t all payroll deductions:									
	5a.	Tax, Medicare, and Social Security deductions	58	a.	\$	1,439	.84	\$		0.00	
	5b.	Mandatory contributions for retirement plans	5b	b.	\$	0	.00	\$		0.00	_
	5c.	Voluntary contributions for retirement plans	50		\$_	0	.00	\$		0.00	_
	5d.	Required repayments of retirement fund loans	50		\$_		.00	\$		0.00	_
	5e.	Insurance	56		\$ \$	603		\$		0.00	_
	5f. 5g.	Domestic support obligations Union dues	5f 5g		\$ _		.00	\$ \$		0.00	_
	5h.	Other deductions. Specify:	-	y. h.+	\$ -			+ \$		0.00	_
6.	Add	d the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	— 6.		\$ \$	2,043		\$		0.00	_
7.		culate total monthly take-home pay. Subtract line 6 from line 4.	7.		* – \$	3,936		\$		0.00	_
8.		t all other income regularly received:			* –	0,000		*		0.00	_
0.	8a.										
		profession, or farm									
		Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total									
		monthly net income.	88	a.	\$	0	.00	\$		0.00	
	8b.	Interest and dividends	8k	b.	\$		.00	\$		0.00	_
	8c.	Family support payments that you, a non-filing spouse, or a dependent									_
		regularly receive Include alimony, spousal support, child support, maintenance, divorce									
		settlement, and property settlement.	80	c.	\$	0	.00	\$		0.00	
	8d.		80		\$		.00	\$		0.00	_
	8e.	Social Security	86	е.	\$	0	.00	\$		0.00	_
	8f.	Other government assistance that you regularly receive									_
		Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental	)								
		Nutrition Assistance Program) or housing subsidies.									
		Specify:	8f		\$_		.00	\$		0.00	_
	8g.	Pension or retirement income	80	-	\$_		.00	\$		0.00	_
	8h.	Other monthly income. Specify: contribution income	_ 8r	h.+	\$_	400	.00	+ \$		0.00	_
9.	Add	d all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.		\$	400	.00	\$		0.0	0
			i								
10.			10.	\$_		4,336.18	+ \$		0.00	= \$ _	4,336.18
	Add	the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	ļ								
11.	Incl othe	te all other regular contributions to the expenses that you list in Schedule ude contributions from an unmarried partner, members of your household, your er friends or relatives. not include any amounts already included in lines 2-10 or amounts that are not	dep						chedule	e J.	
		ecify:			- 1	. , , ,		_	11.		0.00
12.		d the amount in the last column of line 10 to the amount in line 11. The reste that amount on the Summary of Schedules and Statistical Summary of Certaillies							12.	\$	4,336.18
									ļ	Combi	ned
13.	Do	you expect an increase or decrease within the year after you file this form	?							month	ly income
		No.									

Official Form 106l Schedule I: Your Income page 2

Fill	in this information to identify your case:				
Deb	otor 1 Michael J. DiNapoli, III		Che	ck if this is:	
	monaci di Dinapon, m			An amended filing	
	ouse, if filing)			A supplement show 13 expenses as of	ving postpetition chapter the following date:
``				<u> </u>	
Unit	ted States Bankruptcy Court for the: DISTRICT OF NEW JERSEY			MM / DD / YYYY	
1	22-10793 (nown)				
Of	fficial Form 106J				
So	chedule J: Your Expenses				12/15
info	as complete and accurate as possible. If two married people at primation. If more space is needed, attach another sheet to this mber (if known). Answer every question.				
	t 1: Describe Your Household				
1.	Is this a joint case?				
	■ No. Go to line 2.  ☐ Yes. Does Debtor 2 live in a separate household?				
	☐ No				
	☐ Yes. Debtor 2 must file Official Form 106J-2, Expenses	s for Separate House	ehold of Deb	tor 2.	
2.	Do you have dependents? $\square$ No	·			
	Do not list Debtor 1 and Debtor 2.  Fill out this information for each dependent	Dependent's relati Debtor 1 or Debtor		Dependent's age	Does dependent live with you?
	Do not state the				□ No
	dependents names.	spouse		adult	■ Yes
					■ No
		mother in law		adult	☐ Yes
					□ No □ Yes
					□ No
					□Yes
3.	Do your expenses include No				
	expenses of people other than yourself and your dependents?				
Dor	<u> </u>				
Est exp	t 2: Estimate Your Ongoing Monthly Expenses timate your expenses as of your bankruptcy filing date unless your penses as of a date after the bankruptcy is filed. If this is a suppolicable date.	you are using this fo plemental <i>Schedule</i>	orm as a su J, check tl	ipplement in a Cha ne box at the top o	pter 13 case to report f the form and fill in the
Incl	lude expenses paid for with non-cash government assistance i	if you know			
	<ul> <li>value of such assistance and have included it on Schedule I: Yeical Form 106I.)</li> </ul>	Your Income		Your expe	enses
(0	10111 10111 1001.				
4.	The rental or home ownership expenses for your residence. I payments and any rent for the ground or lot.	Include first mortgage	e 4. §	<b>.</b>	2,258.56
	If not included in line 4:				
	4a. Real estate taxes		4a. S	6	0.00
	4b. Property, homeowner's, or renter's insurance		4b. S		0.00
	4c. Home maintenance, repair, and upkeep expenses		4c. \$	·	0.00
_	4d. Homeowner's association or condominium dues		4d. \$		0.00
5.	Additional mortgage payments for your residence, such as ho	ome equity loans	5. \$	<b></b>	0.00

Debt	or 1 Michael J. DiNapoli, III		Case numb	oer (if known)	22-10793
6.	Utilities:				
J.	6a. Electricity, heat, natural gas		6a.	\$	250.00
	6b. Water, sewer, garbage colle		6b.	\$	75.00
		net, satellite, and cable services	6c.	:	279.00
	6d. Other. Specify: <b>cell</b>	rict, satellite, and sable services	6d.	\$	172.34
7.	Food and housekeeping supplie	ne .	7.	\$	380.00
	Childcare and children's educat		8.	\$	0.00
	Clothing, laundry, and dry clean		9.	\$	
		•			20.00
	Personal care products and ser	vices	10.	\$	15.00
	Medical and dental expenses	ata a sana a la caracterita fana	11.	\$	15.00
12.	<b>Transportation.</b> Include gas, main Do not include car payments.	ntenance, bus or train fare.	12.	\$	250.00
13		n, newspapers, magazines, and books	13.	\$	0.00
	Charitable contributions and rel		14.	\$	0.00
	Insurance.	igious donations	17.	Ψ	0.00
10.		d from your pay or included in lines 4 or 20.			
	15a. Life insurance	2 your pay or	15a.	\$	0.00
	15b. Health insurance		15b.	·	0.00
	15c. Vehicle insurance		15c.		190.00
	15d. Other insurance. Specify:		15d.	\$	0.00
16	· · · · <u>-</u>	cted from your pay or included in lines 4 or 20.		Ψ	
10.	Specify:	oled from your pay or moladed in lines 4 of 20.	16.	\$	0.00
17.	Installment or lease payments:			*	
	17a. Car payments for Vehicle 1		17a.	\$	0.00
	17b. Car payments for Vehicle 2		17b.	\$	0.00
	17c. Other. Specify:		17c.	\$	0.00
	17d. Other. Specify:		17d.	\$	0.00
18	. ,	ntenance, and support that you did not repo		Ψ	0.00
10.		5, Schedule I, Your Income (Official Form 10		\$	0.00
19.		pport others who do not live with you.	,	\$	0.00
	Specify:		19.		
20.		ot included in lines 4 or 5 of this form or on	Schedule I: Yo	ur Income.	
	20a. Mortgages on other property	У	20a.	\$	0.00
	20b. Real estate taxes		20b.	\$	0.00
	20c. Property, homeowner's, or r	enter's insurance	20c.	\$	0.00
	20d. Maintenance, repair, and up	okeep expenses	20d.	\$	0.00
	20e. Homeowner's association o	• •	20e.	\$	0.00
21.	Other: Specify:		21.	+\$	0.00
	. ,			<u> </u>	0.00
22.	Calculate your monthly expense	es		•	
	22a. Add lines 4 through 21.			\$	3,904.90
	22b. Copy line 22 (monthly expens	ses for Debtor 2), if any, from Official Form 106	J-2	\$	
	22c. Add line 22a and 22b. The re	esult is your monthly expenses.		\$	3,904.90
22	Calculate your mentaly not ince	ma			
∠3.	Calculate your monthly net inco		23a.	¢	A 226 40
		d monthly income) from Schedule I.		·	4,336.18
	23b. Copy your monthly expense	es from line ZZC above.	23b.	-Ф	3,904.90
	23c. Subtract your monthly expe	nees from your monthly income			
	The result is your <i>monthly n</i>		23c.	\$	431.28
	The result is your monthly h	GUIICOME.	200.	•	
~ .					
24.	For example, do you expect to finish pa	ecrease in your expenses within the year aft aying for your car loan within the year or do you expended.			ease or decrease because of a
24.		aying for your car loan within the year or do you expec			ease or decrease because of a

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Fill in this inform	Fill in this information to identify your case:						
Debtor 1 Michael J. DiNapoli, III							
Debtor 2 (Spouse, if filing)							
United States B	Bankruptcy Court for the: District of New Jersey						
Case number (if known)	22-10793						

Check	Check as directed in lines 17 and 21:							
According to the calculations required by this Statement:								
-	1. Disposable income is not determined under 11 U.S.C. § 1325(b)(3).							
	2. Disposable income is determined under 11 U.S.C. § 1325(b)(3).							
	3. The commitment period is 3 years.							
	4. The commitment period is 5 years.							

☐ Check if this is an amended filing

### Official Form 122C-1

# **Chapter 13 Statement of Your Current Monthly Income and Calculation of Commitment Period**

04/20

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for being accurate. If more space is needed, attach a separate sheet to this form. Include the line number to which the additional information applies. On the top of any additional pages, write your name and case number (if known).

### Part 1: Calculate Your Average Monthly Income

- 1. What is your marital and filing status? Check one only.
  - □ Not married. Fill out Column A, lines 2-11.
  - Married. Fill out both Columns A and B. lines 2-11.

Fill in the average monthly income that you received from all sources, derived during the 6 full months before you file this bankruptcy case. 11 U.S.C. § 101(10A). For example, if you are filing on September 15, the 6-month period would be March 1 through August 31. If the amount of your monthly income varied during the 6 months, add the income for all 6 months and divide the total by 6. Fill in the result. Do not include any income amount more than once. For example, if both spouses own the same rental property, put the income from that property in one column only. If you have nothing to report for any line, write \$0 in the space.

				Colur Debte		Column Debtor non-fili	
Your gross wages, salary, tips, bonuses, overtime payroll deductions).	e, and co	mmissi	ons (before all	\$	5,189.59	\$	0.00
<b>Alimony and maintenance payments.</b> Do not include Column B is filled in.	de payme	ents from	a spouse if	\$	0.00	\$	0.00
All amounts from any source which are regularly of you or your dependents, including child support from an unmarried partner, members of your household and roommates. Do not include payments from a spous listed on line 3.	<b>rt.</b> Includ	le regula: depende	contributions nts, parents,	\$	0.00	\$	0.00
Net income from operating a business, profession, or farm	Debtor	1					
Gross receipts (before all deductions)	\$	0.00					
Ordinary and necessary operating expenses	-\$	0.00					
Net monthly income from a business, profession, or f	arm \$	0.00	Copy here ->	\$	0.00	\$	0.00
Net income from rental and other real property	Debtor	1					
Gross receipts (before all deductions)	\$_	0.00					
Ordinary and necessary operating expenses	<b>-</b> \$ _	0.00					
Net monthly income from rental or other real property	\$	0.00	Copy here ->	\$	0.00	\$	0.00

Official Form 122C-1 Chapter 13 Statement of Your Current Monthly Income and Calculation of Commitment Period

Debtor 1	Michael J. DiNapoli, III	_	Case number	er (if known)	22-10793	3	
			Column A Debtor 1		Column B Debtor 2 o	or	
7. <b>In</b>	terest, dividends, and royalties		\$	0.00	\$	0.00	
8. <b>U</b> ı	nemployment compensation		\$	0.00	\$	0.00	
	o not enter the amount if you contend that the amount received was a e Social Security Act. Instead, list it here:	benefit unde	r				
	For you\$	0.00					
	For your spouse \$	0.00					
9. Pe be no Ur dis pa do	ension or retirement income. Do not include any amount received the enefit under the Social Security Act. Also, except as stated in the next of include any compensation, pension, pay, annuity, or allowance pair inted States Government in connection with a disability, combat-relate sability, or death of a member of the uniformed services. If you receively paid under chapter 61 of title 10, then include that pay only to the eless not exceed the amount of retired pay to which you would otherwis retired under any provision of title 10 other than chapter 61 of that title	sentence, do d by the ed injury or ed any retired extent that it e be entitled		0.00	\$	0.00	
Do ur ur co cri co Go de	come from all other sources not listed above. Specify the source as not include any benefits received under the Social Security Act; pay ader the Federal law relating to the national emergency declared by the der the National Emergencies Act (50 U.S.C. 1601 et seq.) with responsivitus disease 2019 (COVID-19); payments received as a victim of time, a crime against humanity, or international or domestic terrorism; impensation, pension, pay, annuity, or allowance paid by the United Sovernment in connection with a disability, combat-related injury or disease at the far member of the uniformed services. If necessary, list other so exparate page and put the total below.	ments made ne President ect to the of a war or States ability, or					
			\$	0.00	\$	0.00	
			\$	0.00	\$	0.00	
	Total amounts from separate pages, if any.		. \$	0.00	\$	0.00	
44.0			<u> </u>	7	<u> </u>		
	alculate your total average monthly income. Add lines 2 through 10 ach column. Then add the total for Column A to the total for Column B		5,189.59	+ \$	0.00	= \$	5,189.59
	<u></u>						otal average onthly income
art 2:	Determine How to Measure Your Deductions from Income						
	opy your total average monthly income from line 11.					\$	5,189.59
	You are not married. Fill in 0 below.						
	You are married and your spouse is filing with you. Fill in 0 below.						
	You are married and your spouse is not filing with you.						
	Fill in the amount of the income listed in line 11, Column B, that wa						
	dependents, such as payment of the spouse's tax liability or the sp Below, specify the basis for excluding this income and the amount adjustments on a separate page.						
	If this adjustment does not apply, enter 0 below.						
		\$ _					
		\$ _		_			
		+\$ _		_			
				•			
	Total	\$ _	0.0	U Co	opy here=>		0.00
14. <b>Y</b>	our current monthly income. Subtract line 13 from line 12.					\$	5,189.59
15 <b>(</b>	Calculate your current monthly income for the year. Follow these	stans:					
٠٠. د		оторо.				•	5,189.59
	5a Copy line 14 here=>						

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Debtor 1	Michael J. DiNapoli, III	Case number (if known) 22-10793	
	Multiply line 15a by 12 (the number of months in a year).		<b>x</b> 12
15	. The result is your current monthly income for the year for this part of the form.		\$62,275.08

Official Form 122C-1 Chapter 13 Statement of Your Current Monthly Income and Calculation of Commitment Period

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Debto	or 1	Micl	hael J. DiNapoli, III		Case number (if known) 22-	10793	
16.	Calc	culate	the median family income that applies to	you. Follow these	steps:		
	16a.	. Fill ir	the state in which you live.	NJ			
	16b.	. Fill in	n the number of people in your household.	2			
			the median family income for your state and		<del></del>	¢ 88,	511.00
		instru	nd a list of applicable median income amount uctions for this form. This list may also be ava			Ψ	
17.	How	do ti	he lines compare?				
	17a.	•	Line 15b is less than or equal to line 16c. (11 U.S.C. § 1325(b)(3). <b>Go to Part 3.</b> Do N		•		nined under
	17b.	. 🗆	Line 15b is more than line 16c. On the top 1325(b)(3). Go to Part 3 and fill out Calc your current monthly income from line 14 a	ulation of Your D	orm, check box 2, <i>Disposable income is</i> isposable Income (Official Form 1220	determined under 17 :-2). On line 39 of that	I U.S.C. § at form, copy
Part	3:	Ca	Iculate Your Commitment Period Under 11	U.S.C. § 1325(b)	(4)		
18.	Сор	y you	ır total average monthly income from line	11.		\$	5,189.59
	<b>Ded</b> cont	educt the marital adjustment if it applies. If you are married, your spouse is not filing with you, and you ntend that calculating the commitment period under 11 U.S.C. § 1325(b)(4) allows you to deduct part of your ouse's income, copy the amount from line 13.					
			marital adjustment does not apply, fill in 0 on	ı line 19a.		<b>-</b> \$	0.00
	19b.	Subt	ract line 19a from line 18.			\$5,	189.59
20.	Calc	culate your current monthly income for the year. Follow these steps:					
	20a.	. Сору	/ line 19b			\$ <b>5</b> ,	189.59
		Multi	ply by 12 (the number of months in a year).			<b>x</b> 12	
	20b.	. The	result is your current monthly income for the y	ear for this part of	the form	\$62,	275.08
	20c.	Сору	the median family income for your state and	size of household	from line 16c	\$88,	511.00
	21.	How	do the lines compare?				
			Line 20b is less than line 20c. Unless otherw period is 3 years. Go to Part 4.	ise ordered by the	court, on the top of page 1 of this form,	check box 3, The co	mmitment
			Line 20b is more than or equal to line 20c. Un commitment period is 5 years. Go to Part 4.	nless otherwise or	dered by the court, on the top of page 1	of this form, check b	ox 4, The
Part	4:	Sig	gn Below				
	By s	igning	here, under penalty of perjury I declare that	the information on	this statement and in any attachments is	s true and correct.	
X	Mi	chae	nael J. DiNapoli, III I J. DiNapoli, III e of Debtor 1				
		2/2	<b>22/2022</b> I/DD /YYYY				

If you checked 17a, do NOT fill out or file Form 122C-2.

If you checked 17b, fill out Form 122C-2 and file it with this form. On line 39 of that form, copy your current monthly income from line 14 above.

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Debtor 1 Michael J. DiNapoli, III Case number (if known) 22-10793

## **Current Monthly Income Details for the Debtor**

### **Debtor Income Details:**

Income for the Period 08/01/2021 to 01/31/2022.

### Line 2 - Gross wages, salary, tips, bonuses, overtime, commissions

Source of Income: wages

Income by Month:

6 Months Ago:	08/2021	\$5,300.00
5 Months Ago:	09/2021	\$5,388.00
4 Months Ago:	10/2021	\$6,760.00
3 Months Ago:	11/2021	\$4,368.00
2 Months Ago:	12/2021	\$3,924.00
Last Month:	01/2022	\$5,397.52
	Average per month:	\$5,189.59